

1
2
3
4
5
6
7
8 IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF KING

9 In the Guardianship of:) Case No.:
10 _____)
11 _____) NOTICE OF DEATH OF
12 An Incapacitated Person.) INCAPACITATED PERSON
(NT)
(CLERK'S ACTION REQUIRED)

13 The Guardian hereby notifies the Court and interested parties that the above-named
14 Incapacitated Person died on _____ (date of death) in
15 _____, (location of death) Washington. At the time of death, the
16 Incapacitated Person was _____ years of age, and was receiving custodial care at _____
_____.

17 The Guardian will file and present to the Court and interested parties a Final Report and
18 Accounting within 30 days of the death, as required by State law.

19 I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE
20 STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT.

21 Signed at _____, Washington, _____, _____ 200__.

22 _____
Signature

Printed Name

23 _____
Address

Telephone/Fax Number

24 _____
City, State, Zip Code

25 _____
Email Address